

THE CANADIAN DANCESPORT



FEDERATION

President: Ann Harding-Trafford, ON;
Executive: Meryem Pearson, PQ, Jane Edgett, ATL, Barbara Child, BC

AMATEUR INSTRUCTOR EXAMINATION

APPLICATION FORM

STYLE - STANDARD / LATIN AMERICAN (Please Circle)

NAME OF CANDIDATE _____

NAME OF REGIONAL ASSOC. _____

ADDRESS OF CANDIDATE _____

TELEPHONE NUMBER _____

EMAIL _____

EXAMINATION FEE: \$75.00

Please make cheque payable to: Canadian Dancesport Federation

Send Application to: Patricia Goh, Examination Coordinator

PO Box 1005, TDC Postal Station, 77 King St. West, Toronto ON M5K 1P2

CANDIDATE'S SIGNATURE: _____ **Date:** _____

(Office only)

EXAMINER/EVALUATOR _____

(Office only)

EXAMINATION DATE _____